

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

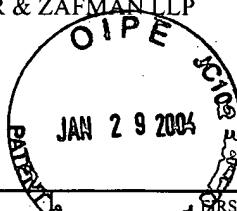
**Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 10/22/2003

Lester J. Vincent  
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP  
Seventh Floor  
12400 Wilshire Boulevard  
Los Angeles, CA 90025-1026



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Christopher P. Marshall	(Depositor's name)
<i>Christopher P. Marshall</i>	(Signature)
1/22/2004	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/775,491	02/02/2001	Scott Adams	4341P053	7754

TITLE OF INVENTION: ELECTROSTATIC ACTUATOR FOR MICROELECTROMECHANICAL SYSTEMS AND METHODS OF FABRICATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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• nonprovisional NO \$1330 \$300 \$1630 01/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TAMAI, KARL I	2834	310-309000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Calient Networks, Inc.

San Jose, California

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

Advance Order - # of Copies ten (10)

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *Lester J. Vincent* (Date) *January 22, 2004*  
Lester J. Vincent, Reg. No. 31,460

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

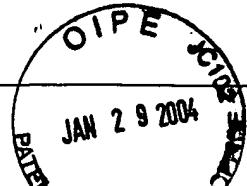
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

02/02/2004 JADD02 00000115 09775491

01 FC:1501	1330.00 OP
02 FC:1504	300.00 OP
03 FC:8001	30.00 OP

TRANSMIT THIS FORM WITH FEE(S)



## FEE TRANSMITTAL FOR FY 2004

(FY 2004 Begins 10/01/2003)

**TOTAL AMOUNT OF PAYMENT (\$)** 1,660.00

Complete if Known:

Application No. 09/775,491

Filing Date February 2, 2001

First Named Inventor Scott Adams

Date of Allowance: October 22, 2003

Examiner Name Tamai, Karl I.

Confirmation No.: 7754

Art Unit 2834

Attorney Docket No. 4341P053

Applicant claims small entity status. See 37 CFR 1.27.

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account

Deposit Account Number : 02-2666

Deposit Account Name:

The Director is Authorized to do the following with respect to the above-identified Deposit Account:

Charge fee(s) indicated below.

Credit any overpayments.

Charge any additional fees during the pendency of this application.

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Charge fee(s) indicated below except for the filing fee.

### FEE CALCULATION

#### 1. BASIC FILING FEE

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	
Code	(\$)	Code	(\$)
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
		Utility application filing fee	
		Design application filing fee	
		Plant filing fee	
		Reissue filing fee	
		Provisional application filing fee	

SUBTOTAL (1) \$ 0.00

#### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	- 20** =	X	=
Independent Claims	- 3** =	X	=
Multiple Dependent			=

\*\*Or number previously paid, if greater; For Reissues, see below.

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>
Fee	Fee	Fee
Code	(\$)	Code
1202	18	2202
		9
		Claims in excess of 20
1201	86	2201
		43
		Independent claims in excess of 3
1203	290	2203
		145
		Multiple dependent claim, if not paid
1204	86	2204
		43
		**R issue independent claims over original patent
1205	18	2205
		9
		**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0.00

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

<b>Large Entity</b>	<b>Small Entity</b>	<b>Fee Description</b>	<b>Fee Paid</b>
Fee	Fee	Fee	
Code	(\$)	Code	(\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1813	8,800	1813	8,800
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1814	110	2814	55
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
1504	300	1504	300
1505	300	1505	300
1803	130	1803	130
1808	130	1808	130
1454	1,330	1454	1,330
Other fee (specify) <u>Printed Copy of patent w/o color (10 copies)</u>			<u>30.00</u>
Other fee (specify) _____			_____
<b>SUBTOTAL (3) \$ 1,660.00</b>			

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY:**

Typed or Printed Name: Lester J. Vincent

Signature: Lester J. Vincent Date: January 22, 2004

Reg. Number: 31,460 Telephone Number: (408) 720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450